



Photography Waiver Form

I, _____, acknowledge that during any event through personal or organized photo documentation, a WFR Citizen Fire Academy participant/representative may have their photo taken with or without their knowledge.

By signing below, I approve the use of any photo of myself to be used by the City of Wylie for publication for the purpose of promoting City of Wylie and Wylie Fire Rescue programs and facilities through use of video, photographs, and websites or any other means.

I also grant permission for my photo to appear on the City of Wylie and the Wylie Fire Rescue web sites.

Date:

Print Name of Signature:

Signature:
